

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 1 OF 2  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>New Prosperity Foundation; The</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00488494	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 12 / 23 / 2015</div> </div>	

Full Name of Payee <b>XPS Professional Services</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 23 / 2015	
Mailing Address 220 E Adams St Suite 200		Amount 10000.00	
City Springfield	State IL	Zip Code 62701	Transaction ID : SE.5354
Purpose of Expenditure Advertising - Digital (Paid Next Period)		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate ROBERT JAMES MR. DOLD JR.		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: 10 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: IL
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>XPS Professional Services</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 21 / 2015	
Mailing Address 220 E Adams St Suite 200		Amount 2097.00	
City Springfield	State IL	Zip Code 62701	Transaction ID : SE.5355
Purpose of Expenditure Advertising - Digital (Payment in Next Period)		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate ROBERT JAMES MR. DOLD JR.		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: 10 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: IL
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	12097.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gregory Baise

[Electronically Filed]

Date

 MM / DD / YYYY  
 01 / 27 / 2016

Signature